## PART B - FEE(S) TRANSMITTAL

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	appropriate. All further cor	respondence including the local period of the	Patent, advance or	rders and notif	fication of mai	intenance fees v	vill be maile	d to the curren	should be completed where t correspondence address as parate "FEE ADDRESS" for		
		E ADDRESS (Note: Use Block 1 for	any change of address	015	Fee(s)	Transmittal, Th	is certificate	cannot be used	for domestic mailings of the for any other accompanying tent or formal drawing, must		
	30448 7590 09/23/2004 papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.										
	AKERMAN SEN P.O. BOX 3188 WEST PALM BEA	ACH, FL 33402-3188	PER	& TRADEMAR		Cer by certify that the Postal Service vised to the Mai	rtificate of Mais Fee(s) Tra with sufficier I Stop ISSU	lailing or Trar insmittal is being t postage for fi E FEE addres	ismission  ng deposited with the United first class mail in an envelope s above, or being facsimile date indicated below.		
10,	/19/2004 FMETEKI2 0000	0055 500951 1072515	58	RADEMA	transm				(Depositor's name)		
	FC:2501 685.00 FC:1504 300.00					Meil	Je#er		(Signature)		
						10/14/20	204		(Date)		
	APPLICATION NO.	FILING DATE		FIRST NAMED	INVENTOR		ATTORNEY	DOCKET NO.	CONFIRMATION NO.		
	10/725,158	12/01/2003	· · ·	Hassan E.	El-Shall		585	3-479	1777		
	TITLE OF INVENTION: MANUFACTURE OF PAP		T PULPING LIC	OUOR WITH	LIGNIN SE	PARATION TO	) RECOVE	R ALKALI P	ULPING CHEMICALS IN		
	APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICA	TION FEE	TOTAL	EE(S) DUE	DATE DUE		
7	nonprovisional	*				300	· \$965		12/23/2004		
	EXAM		ART UN		CLASS-SI		J				
	HRUSKOCI, PETER A				210-7	16000					
	1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 Tee Address indicate PTO/SB/47; Rev 03-02 of Number is required.	registered attorney or agent) and the names of up to									
		DECIDENCE DATA TO D	E DRINTED ON T								
3	B. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
	(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
	UNIVERSKY	OF FLORIDA	1	G	AINESVI	LLE, FL			roup entity Government		
						dividual 🕻 Co	orporation or	other private g	roup entity Government		
	4a. The following fee(s) are	enclosed:	45	Payment of I		f the fee(s) is en	أحموا				
	Issue Fee  Publication Fee (No. s	mall entity discount permitte	νd)			r the ree(s) is en Form PTO-2038					
	Advance Order - # of			M The Direc	ctor is hereby		harge the reg	uired fee(s), or	r credit any overpayment, to copy of this form).		
		(from status indicated above MALL ENTITY status. See 2	' 1 I	_		claiming SMAl		status. See 37 C	CFR 1.27(g)(2).		
	The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (if required) vords of the United States Pare	ne Fee and Publicate vill not be accepted and Trademark	tion Fee (if and I from anyone Office.	y) or to re-appl other than the	y any previousl applicant; a regi	y paid issue f stered attorn	ee to the applicate or agent; or	ation identified above. the assignee or other party in		
	Authorized Signature		/\		<u></u>	***************************************	0/14/20				

١١٤٨ This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## **TRANSMITTAL** for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

✓ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 9	65.00
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Complete if Known					
Application Number	10/725,158				
Filing Date	December 1, 2003				
First Named Inventor	El-Shall, H.				
Examiner Name	Hruskoci, Peter				
Art Unit	1724				
Attorney Docket No.	5853-479				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
Order Order	Large E	ntity	Small	Entity	•	
Denosit				Fee (\$)	Fee Description	Fee Paid
Account Number Akerman Senterfitt		130	2051		Surcharge - late filing fee or oath	Fee Faid
Deposit FO 0051	1052	50	2052	25	Surcharge - late provisional filing fee or	
Account Name	4050	400	4050	400	cover sheet Non-English specification	
The Director is authorized to: (check all that apply)	1053 1812 2	130	1053 1812		For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments	1804	920*	1804	_,	Requesting publication of SIR prior to	
Charge any additional fee(s) or any underpayment of fee(s)	1004	520	1004	520	Examiner action	<b></b>
Charge fee(s) indicated below, except for the filing fee	1805 1	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
to the above-identified deposit account.	1251	110	2251	55	Extension for reply within first month	
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month	
1. BASIC FILING FEE Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Description Fee Paid	1254 1	1,480	2254	740	Extension for reply within fourth month	
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255 2	2,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402		Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451 1	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to revive - unavoidable	
, , [7,7	1453 1	1,330	2453	665	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1	1,330	2501	665	Utility issue fee (or reissue)	665.00
Extra Claims below Fee Paid	1502	480	2502	240	Design issue fee	
Total Claims20** = X =	1503	640	2503	320	Plant issue fee	
Claims X X X Multiple Dependent	1460	130	1460	130	Petitions to the Commissioner	
	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity   Small Entity   Fee Fee   Fee Fee   Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	8021	1 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a submission after final rejection	
1201 86 2201 43 Independent claims in excess of 3					(37 CFR 1.129(a))	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 0.00	Other f	// '				300.00
**or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic I	Filing F	ee Paid SUBTOTAL (3) (\$) 965.	00

(Complete (if applicable)) SUBMITTED BY Registration No. Name (Print/Type) Neil R. Jetter 46.803 Telephone 561-653-5000 October / 2004 Date Signature

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Total Number of Pages in This Submission  Fee Transmittal Form	to -					
Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53	cicensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addre Ferminal Disclaimer Request for Refund CD, Number of CD(s)	ess Oth	1			
SIGNA	TURE O	F APPLICANT, ATTORN	EY, OR AGENT			
Firm or Individual name Signature  Neil R. Jetter Akerman Senterfitt  October/ 7, 2004						
	DTIEIC	ATE OF TRANSMISSION	I/MAILING			
I hereby certify that this correspondence is be sufficient postage as first class mail in an enter the date shown below.  Typed or printed name  Neil R. Jetter	eina facsir	mile transmitted to the USPTO or dressed to: Commissioner for Pat	deposited with the	United States I 50, Alexandria, V	Postal Service with VA 22313-1450 on	
Signature				Date Octob	er <b>/Y</b> , 2004	

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